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APPLICANTS

Jimmie Earl DeWitt JR., Georgetown, TX;
 Frank Eliot Levine, Austin, TX;
 Christopher Michael Richardson, Austin, TX;
 Robert John Urquhart, Austin, TX;

**** CONTINUING DATA *******

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 04/16/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY TX	SHEETS DRAWING 4	TOTAL CLAIMS 53	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				

Verified and
Acknowledged

Examiner's Signature Initials

ADDRESS

35525

TITLE

METHOD AND SYSTEM FOR RECORDING EVENTS OF AN INTERRUPT USING PRE-INTERRUPT
HANDLER AND POST-INTERRUPT HANDLER

FILING FEE RECEIVED 2136	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
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